Image# 13964515449 PAGE 1 / 22

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TOHW 3X	For Other Than An Au	thorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, typ over the lines.	e 12FE4M5
Rhode Island Republ	ican State Central Co	mmittee	
ADDRESS (number and street) ▼	1800 Post Road Suite 17-I		
Check if different than previously reported. (ACC)	Warwick		
2. FEC IDENTIFICATION N	NUMBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00078196		IS THIS NEW (N)	OR × AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	Report Due On:	o 20 (M2) May 20	(Non-Election Year Only)
April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report	(Q1) (c) 12-Day	Primary (12P) Convention (12C)	
Quarterly Report January 31 Year-End Report	Florid	on on	in the State of
July 31 Mid-Year Report (Non-elect Year Only) (MY) Termination Repo (TER)	POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
(1211)	Electi	on on	State of
5. Covering Period	07 01 2012		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined Type or Print Name of Treasur	•	f my knowledge and belief i	t is true, correct and complete.
Signature of Treasurer Ban	rbara M May Holmes	[Electronically Filed]	Date 08 / 15 / 2013
NOTE: Submission of false, erro	oneous, or incomplete information	on may subject the person sig	ning this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
	e or Type Committee Name		
Rh	node Island Republican State Ce	entral Committee	
Rep	ort Covering the Period: From:	07 01 2012 To:	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a	a) Cash on Hand January 1, 2012		590.32
(I	c) Cash on Hand at Beginning of Reporting Period	538.36	
(0	c) Total Receipts (from Line 19)	286107.00	286107.00
(0	d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	286645.36	286697.32
7. T	otal Disbursements (from Line 31)	48561.97	48613.93
F	Cash on Hand at Close of Reporting Period subtract Line 7 from Line 6(d))	238083.39	238083.39
th	Debts and Obligations Owed TO The Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
th	Debts and Obligations Owed BY The Committee (Itemize all on Schedule C and/or Schedule D)	11511.92	

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Rhode Island Republican State Central Committee

ributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0.00 , , , 0.00 , , 0.00 285000.00	0.00
Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
(ii) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶ Political Party Committees Other Political Committees	0.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶ Political Party Committees Other Political Committees	0.00	0.00
Political Party Committees Other Political Committees		0.00
Other Political Committees	285000.00	
Other Political Committees		285000.00
	0.00	0.00
Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
	285000.00	285000.00
sfers From Affiliated/Other		
/ Committees	0.00	0.00
	0.00	0.00
oans Received	0.00	0.00
Panaymanta Passiyad	0.00	0.00
	0.00	0.00
·	1107 00	1107.00
	1101.00	1107.00
	0.00	0.00
	0.00	0.00
·	0.00	0.00
	0.00	0.00
	0.00	0.00
(ITOTTI Scriedule 113)	0.00	0.00
ovin Funds (from Schodulo HE)	0.00	0.00
Leviii i ulius (Ilolii Schedule 113)	7	
otal Transfers (add 18(a) and 18(b))	0.00	0.00
	Totals to Line 33, page 5)	Totals to Line 33, page 5)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. O	perating Expenditures: a) Allocated Federal/Non-Federal Activity (from Schoolule H4)		Calcinati Four to Dute
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(I) Federal Share	7	
	(ii) Non-Federal Share	0.00	0.00
(k	o) Other Federal Operating		
	Expenditures	38686.97	38686.97
(0	c) Total Operating Expenditures		
_	(add 21(a)(i), (a)(ii), and (b))▶	38686.97	38686.97
	ransfers to Affiliated/Other Party	875.00	875.00
С	committeesontributions to	673.00	070.00
	ederal Candidates/Committees nd Other Political Committees	9000.00	9000.00
	ndependent Expenditures		
(ι	use Schedule E)	0.00	0.00
С	oordinated Party Expenditures		
(ί	2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00
		0.00	200
L	oan Repayments Made	0.00	0.00
1.	oans Made	0.00	0.00
	lefunds of Contributions To:	7	5.55
(8	a) Individuals/Persons Other Than Political Committees	0.00	0.00
	That I omioa commission manner		
(k	o) Political Party Committees	0.00	0.00
(0	c) Other Political Committees		
	(such as PACs)	0.00	0.00
/-	A) Total Contribution Defunds		
(0	d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (c))	7 7	
. О	other Disbursements	0.00	51.96
_			
F	ederal Election Activity (2 U.S.C. §431(20))		
(8	a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) III aviall Chara	0.00	0.00
/ k	(ii) "Levin" Share	3.00	
(1	With Federal Funds	0.00	0.00
(0		7 7 7	
`	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
		7	7 - 7 - 7 - 7
	otal Disbursements (add Lines 21(c), 22,		
2	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	48561.97	48613.93
_	atal Fadaval Bishumana da	, , , , , , , , , , , , , , , , , , , ,	
	otal Federal Disbursements subtract Line 21(a)(ii) and Line 30(a)(ii)		
	om Line 31)	48561.97	48613.93
"	o 2	.555.15.	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO 1 01111 3X (11ev. 02/2003)		r age 3
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	285000.00	285000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	285000.00	285000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	38686.97	38686.97
7. Offsets to Operating Expenditures (from Line 15, page 3)	1107.00	1107.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	37579.97	37579.97

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 22 (check only one)					
IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a X 11b 11c 12 13 14 15 16 17					
	ny information copied from such Reports and Si for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) Rhode Island Republican State	Central (Committee						
Α.	Full Name (Last, First, Middle Initial) National Republican Congressional Co	ommittee		Date of Receipt					
	Mailing Address			08 27 _ 2012 _					
	City State		Zip Code	Transaction ID : SA11B.7457 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0075820	5000.00					
	Name of Employer	Occupation	I	Wire Transfer					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00						
В.		Committee	9	Date of Receipt					
	Mailing Address	Chaha	7:n Code	09 25 2012					
	City	State	Zip Code	Transaction ID : SA11B.7458 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0075820	35000.00					
	Name of Employer	Occupation	l	Wire Transfer Party Building					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 40000.00						
<u> </u>	Full Name (Last, First, Middle Initial) National Republican Congressional	al Commi	ttee	Date of Receipt					
	Mailing Address			09 27 2012					
	City	State	Zip Code	Transaction ID : SA11B.7459 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.		0075820	30000.00					
	Name of Employer	Occupation		Wire Transfer					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 70000.00						
S	UBTOTAL of Receipts This Page (optional)			70000.00					

TOTAL This Period (last page this line number only).....

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		1			ly or	, ′		E	7 OF	22	_
			Detailed Summary Page		11a	×	11b 14	11c		12 16		
	ny information copied from such Reports and Si for commercial purposes, other than using the				n for the		oose of			ntributi		_
	NAME OF COMMITTEE (In Full)		, p									_
	Rhode Island Republican State	Central (Committee									
A.	Full Name (Last, First, Middle Initial) National Republican Congressional Co	ommittee			Date of	of Re	ceipt					
	Mailing Address				M = 1	/	D I			Y =	Υ	
	City	State	Zip Code	_	09 Tran	sacti	28	SA11B.7		012	_	
	·,	o late	p					Receipt th				_
	FEC ID number of contributing federal political committee.	C co	0075820			Ξ	,		-	00000.	00	
	Name of Employer	Occupation			Wire Tr	ansfe	er					
	, ,											
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		270000.00	11								
	Other (specify) ▼		270000.00	4								
	Full Name (Last, First, Middle Initial)											_
В.	Republican Natl Committee				Date of	of Re	ceipt					
	Mailing Address 310 First Street, SE				M = N	/	DII			Y	Y	
	City	State	Zip Code	-	08 Tran	sacti	08 • ID •	SA11B.7		12		
	Washington	DC	20003					Receipt th				_
	FEC ID number of contributing					_	-			-	20	
	federal political committee.	C				_	7	7	1	5000.0	JU	
	Name of Employer	Occupation	l	\dashv	Wire Tr	ansfe	er					
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼			1								
	cano: (opeony) \			4								
<u> </u>	Full Name (Last, First, Middle Initial)				Date of	of Re	ceipt					
	Mailing Address				M = N		D .	D / Y	- Y	- Y	Y	
	City	Ctata	7in Codo					╛┕				
	City	State	Zip Code		Amour	at of	Each F	Possint th	ic D	Pariod		_
	FEC ID number of contributing				Amoul	it oi	Each	Receipt th	15 F	enou	-	
	federal political committee.	C			_	-	7	7	-			
	Name of Employer	Occupation										
	Receipt For:	Aggregate	Year-to-Date ▼	\dashv								
	Primary General	, iggi ogalo		٦ [
	Other (specify) ▼											

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7

215000.00

285000.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 22 (check only one) 11a 11b 11c 12 13 14 X 15 16 17
	v information copied from such Reports and Stat for commercial purposes, other than using the n			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Rhode Island Republican State C	entral C	Committee	
A.	Full Name (Last, First, Middle Initial) 08/22/2012 Aggregate 08/22/2012 Aggr Mailing Address	egate De	eposit	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID : SA15.7461 Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	С		930.00
	Name of Employer	Occupation		Transportation reimbursement by delegates
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 930.00	
В.	Full Name (Last, First, Middle Initial) Mailing Address			Date of Receipt
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	С		
		Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	, ,	Occupation		
	Receipt For: Primary General Other (specify)	Aggregate		
SI	JBTOTAL of Receipts This Page (optional)			930.00

TOTAL This Period (last page this line number only).....

930.00

SC	CHEDULE B (FEC Form 3X)	EOD I				R LINE NUMBER: PAGE 9 OF					22		
	EMIZED DISBURSEMENTS		arate schedule(s)		OR LINE NUMBER: PAGE 9 heck only one)						<u> </u>		
11	LIVIIZED DISDUNGLIVILINIS		category of the Summary Page	_ i ·	21b								26
		Detailed	Juninary Page		27	28a		28b	Н	28c	29		30b
	y information copied from such Reports and Staten												;
or	for commercial purposes, other than using the name	ne and addr	ress of any politi	cal commit	tee to	solicit co	ntrib	utions	fron	n such	commi	ttee.	
	NAME OF COMMITTEE (In Full)												
V	Rhode Island Republican State Ce	ntral Co	mmittee										
_	Full Name (Last, First, Middle Initial)												
A.	Balloons over Rhode Island					Date o							
	Mailing Address 52 Walnut Grove Avenue					09	/	1	0		2012	Y	
	City	State	Zip Code										
	Cranston	RI	02920			Trans	sacti	on ID	: SB	21B.74	82		
	Purpose of Disbursement Advertising			226					D			.	
	Candidate Name			006		Amoun	it of	∟ach	DISD	urseme	ent this	Perio	a
				Categor Type	y/					,	39	8.04	
		nent For: 2											
		Primary	General										
	State: District:	Other (spec	∪iiy) ▼										
_	Full Name (Last, First, Middle Initial)												
В.						Date o	of Dis	sburse	men	t			
						M = M	/	D	D	/ Y	Y Y	Y	
	Mailing Address 52 Walnut Grove Ave					09 05 2012							
	,	State	Zip Code			Trans	sacti	ion ID	: SB	321B.74	180		
	Cranston Purpose of Disbursement	RI	02920										
	Advertising and Campaign			006		Amoun	nt of	Each	Disb	urseme	nt this	Perio	od
	Candidate Name			Categor	v/		-				-		
				Type	<i>y</i> .			7		7	197	6.40	
	Office Sought: House Disbursen												
		Primary	General										
	President State: District:	Other (spec	ully) 🔻										
_	Full Name (Last, First, Middle Initial)												
C.	Ann Clanton					Date o	of Dis	sburse	men	t			
						M M	/	D	D	/ Y	Y Y	Y	
	Mailing Address 60 Valley St					08		2	1	L.	2012		
	Unit 17 Building 1 City S	State	Zip Code										
	Providence	RI	02909			Trans	sacti	ion ID	: SB	21B.74	78		
	Purpose of Disbursement												
	Transportation for delegates for Convention			002		Amoun	nt of	Each	Disb	urseme	nt this	Perio	d
	Candidate Name			Categor	y/						58	7.29	
	Office Sought: House Disbursen	nent For:		Туре			-	7	-	7			_
		Primary	General										
		Other (spec											
	State: District:	` .	•• •										
	·						-	-	-	-	_	-	=
s	UBTOTAL of Disbursements This Page (optional)				•			1		,	296	1.73	
Г						-						-	T
ΙТ	OTAL This Period (last page this line number only)				•			m		- m -			

SC	CHEDULE B (FEC Form 3X)			EOD	LINE	NIIMDET	<u> </u>			PAGE	10	OF 2	22				
	EMIZED DISBURSEMENTS		arate schedule(s)	\ I -	FOR LINE NUMBER: (check only one)						J. Z	_					
			category of the Summary Page	_ I `	21b	22	23 24 25				26						
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	y information copied from such Reports and Staten for commercial purposes, other than using the nam																
5	NAME OF COMMITTEE (In Full)	unu auul	ooo or arry politi	our commit		JOHOIL O	J. ILI IL	, a (10118	, 11011	Juon	50111111		_				
$ \rangle$	Rhode Island Republican State Ce	ntral Co	mmittee														
\angle	Full Name (Last, First, Middle Initial)												_				
Α.	Ann Clanton					Date	Date of Disbursement										
						M M / D D / Y Y Y											
	Mailing Address 60 Valley St Unit 17 Building 1					09		1	5	_	2012	_					
		State	Zip Code			T		: ID		04D 74	00	83					
	Providence	RI	02909			iran	sact	ווon טו	: 28	321B.74	83						
	Purpose of Disbursement Administrator			001		Amou	nt of	Eoob	Dich	urseme	nt thin	Pariod					
	Candidate Name					Amou	111 01	Lacii	טואט	urseme	111 11115	renou	4				
				Catego Type				7		7	125	0.00					
	Office Sought: House Disbursen																
	Senate	Primary	General														
	State: District:	Other (spec	Jily) ▼														
_	Full Name (Last, First, Middle Initial)												_				
В.	Ann Clanton					Date	of Di	sburse	emen	t							
	Mailing Address 60 Valley St				09 24		_	/ Y	Y Y Y 2012	Y							
	Unit 17 Building 1					03			.4		2012						
	City S Providence	State RI	Zip Code 02909			Transaction ID : SB21B.7485											
	Purpose of Disbursement		02303	_													
	Reimbursement expenses convention			002		Amou	nt of	Each	Disb	urseme	nt this	Period					
	Candidate Name			Catego							25	8.71	1				
	Office Sought: House Disbursen	nent For: 2	2012	туре	,		_	7	_	7							
	Senate	Primary	General														
	President	Other (spec	-														
_	State: District:																
C	Full Name (Last, First, Middle Initial)					Date	of Di	shurse	man	t							
Ο.	FLS Connect					M			D		Y	V					
	Mailing Address PO Box 187					09			1		2012						
	City S	State	Zip Code														
	Hudson	WI	54016			Tran	sact	ion ID	: SB	321B.75	02						
	Purpose of Disbursement			1													
	Candidate Name	004		Amou	nt of	Each	Disb	urseme	nt this	Period							
	Candidate Name	Catego Type			3143.97					1							
	Office Sought: House Disbursen	nent For:		, , , ,				,		7							
	Senate	Primary	General														
	President	Other (spec	cify) 🔻														
_	State: District:																
,	UBTOTAL of Disbursements This Page (optional)										465	2.68	1				
L	ODITINE OF DISDUISEMENTS THIS FAGE (OPHONAI)				·· •	-	+	7	\Rightarrow	1		-	4				
т	OTAL This Period (last page this line number only)				▶												

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (in Full) Rhode Island Republican State Central Committee Full Name (Last, First, Middle Initial) Majority Strategies Mailing Address 135 Professional Drive Suite 104 City State Disbursement Advertising Doherty campaign Candidate Name Doherty for Congress Office Sought: State: RI District: 01 Full Name (Last, First, Middle Initial) Mailing Address City State District: 01 Full Name (Last, First, Middle Initial) Mailing Address City State District: 01 Full Name (Last, First, Middle Initial) Amount of Each Disbursement Category/ Type Amount of Each Disbursement Amount of Each Disbursement Category/ Type Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate President Category/ Type Office Sought: House Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Disbursement this Period Amount of Each Disbursement this Period Category/ Type Other (specify) Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)	Hoo concrete och adula/-\	FOR LINE		PAGE 11 OF 22			
Amount of Each Disbursement this Period Category/ Purpose of Disbursement Full Name (Last, First, Middle Initial) Alailing Address City State: Disbursement Candidate Name Category Type Category Type Amount of Each Disbursement this Period Category Type	TEMIZED DISBURSEMENTS	for each category of the	X 21b	22				
NAME OF COMMITTEE (In Full) Rhode Island Republican State Central Committee Full Name (Last, First, Middle Initial) Maling Address Advertising Doherty campaign Candidate Name President State: Date of Disbursement Date of Disbursement this Period Date of Disbursement this Period Category' Type Date of Disbursement Date of Disbursement this Period Date of Dis	Any information copied from such Reports and Statem	nents may not be sold or use	ed by any perso	on for the purp	ose of soliciting contributions			
Majority Strategies Mailing Address 135 Professional Drive Suite 104 City State Zip Code Ponte Vodre FL 32082 Prurpose of Disbursement Advertising Doherty campaign Candidate Name Doherty for Congress Office Sought:	NAME OF COMMITTEE (In Full)		ar committee to	SOIICIT CONTINUE	ations from such committee.			
Mailing Address 135 Professional Drive Suite 104 City Ponte Vedre Ponte Vedre Purpose of Disbursement Advertising Doherty campaign Candidate Name Doherty for Congress Office Sought: State: RI District: 01 Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Mailing Address City State: Zip Code Purpose of Disbursement Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Mailing Address City Senate President Other (specify) Senate President Other (specify) Senate President Other (specify) Type Office Sought: Full Name (Last, First, Middle Initial) Mailing Address City State: Disbursement Candidate Name Other (specify) Type Office Sought: House Senate President Candidate Name Other (specify) Type Office Sought: Senate President Candidate Name Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Type Office Sought: Senate President Candidate Name Office Sought: Senate President Candidate Name Other (specify)								
Mailing Address City State Zip Code Primary General Other (specify) Full Name (Last, First, Middle Initial) State: Disbursement Candidate Name Candidate Name Cottegory/ Office Sought: House Primary General Disbursement Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Cattegory/ Other (specify) Transaction ID: \$8218.7508 Amount of Each Disbursement this Period Category/ Type Date of Disbursement Amount of Each Disbursement Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Other (specify) Category/ Type Disbursement Amount of Each Disbursement Category/ Type Office Sought: House Disbursement Candidate Name Category/ Office Sought: House Primary General Other (specify) Senate Primary General Other (specify) Othe	A. Majority Strategies							
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Purpose of Disbursement Advertising Doherty campaign Candidate Name Doherty for Congress Office Sought: House	-			Transactio	on ID : SB21B.7508			
Candidate Name Dote		FL 32082						
Doherty for Congress Office Sought: House President State: RI District: 01 Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Office Sought: House Primary General Primary General Primary General Primary General Other (specify) ▼ Amount of Each Disbursement this Period Category/ Type Office Sought: House Primary General Disbursement To: State: District: District: District: General Primary General Primary General Primary General Primary General Disbursement To: General Primary General Pr	Advertising Doherty campaign			Amount of E	Each Disbursement this Period			
Office Sought:					30623.58			
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Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District:								
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: City State Zip Code Amount of Each Disbursement this Period Category/ Type Category/ Type								
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Amount of Each Disbursement this Period	Mailing Address							
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Amount of Each Disbursement this Period	City	State Zip Code						
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District:	Purpose of Disbursement							
Office Sought: House Senate Primary General Other (specify) ▼ State: District:	Candidate Name							
SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General			,			
333101112 of Brookformorito Thio Fago (optional)	SUBTOTAL of Dishursements This Page (ontional)				30623.58			
	The or biobursoments this rage (optional)		·····					

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 12 OF 22
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		☐ 24 ☐ 25 ☐ 26
	Detailed Summary Page	27	28a 28b	28c 29 30
Any information copied from such Reports and Statem				
or for commercial purposes, other than using the name	ne and address of any politica	I committee to	solicit contributions f	rom such committee.
NAME OF COMMITTEE (In Full) Rhode Island Republican State Cel	ntral Committon			
•	illiai Committee			
Full Name (Last, First, Middle Initial)			Date of Disbursem	ont
A. Republican Party of Virginia			M M / D D	
Mailing Address Richard D Obenshain Center			08 21	2012
15 East Grace St	State Zin Code			
City S Richmond	State Zip Code VA 23219		Transaction ID :	SB22.7497
Purpose of Disbursement				
Convention Expenses		002	Amount of Each D	isbursement this Period
Candidate Name		Category/		875.00
Office Sought: House Disbursen	nent For:	Туре	7	
Senate	Primary General			
	Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)				
3.			Date of Disbursem	ent
			M = M / D = D	/ Y = Y = Y = Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
r dipose of Disbursement			Amount of Each D	isbursement this Period
Candidate Name		Category/		
0.00		Type		7
Office Sought: House Disbursen Senate	nent For: Primary General			
	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)			D . (D: I	
C.			Date of Disbursem	
Mailing Address			M M / D D	/ Y = Y = Y = Y
City	State Zip Code			
Only Control	State Zip Code			
Purpose of Disbursement				
Candidate Name			Amount of Each D	isbursement this Period
		Category/ Type		
Office Sought: House Disbursen				
	Other (specify) —			
State: District:	Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)				875.00
				875.00
TOTAL This Period (last page this line number only)				8/5.00

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SCHEDULE B (FEC Form 3X)	1	, FOR LINE	NUMBER: PAGE 13 OF 22
ITEMIZED DISBURSEMENTS	Use separate schedule for each category of the	e(s) (check only	v one)
	Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30b
[
Any information copied from such Reports and States or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)			2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Rhode Island Republican State Ce	entral Committee		
Full Name (Last, First, Middle Initial)			
A. Doherty for Congress	Doherty for Congress		
Mailing Address 225 Newman Ave			08 21 2012
City	State Zip Code		Transaction ID : SB23.7494
East Providence	RI 02916		Transaction id . 3623.7434
Purpose of Disbursement Doherty for Congress		011	Amount of Each Disbursement this Period
Candidate Name		Category/	3000.00
Office Sought: House Disburse	ment For: 2012	Туре	3000.00
Senate Disburse	Primary X General	al	
President	Other (specify) ▼		
State: RI District: 01			
Full Name (Last, First, Middle Initial)			
B. Hinckley for US Senate			Date of Disbursement
Mailing Address 2212 Post Rd.			08 21 2012
City	State Zip Code		Transaction ID : SB23.7491
Warwick	RI 02886		Transaction ib . 3523.7431
Purpose of Disbursement Hinckley for US Senate		011	Amount of Each Disbursement this Period
Candidate Name		Category/	0000.00
		Type	3000.00
	ment For: 2012	-1	
Senate President	Primary	al	
State: RI District: 01	Other (specify)		
Full Name (Last, First, Middle Initial)			
C. Michael Riley			Date of Disbursement
. Thoriaci i thoy			
			M M / D D / Y Y Y Y
Mailing Address PO Box 376			09 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 376	State Zip Code		09 12 2012
Mailing Address PO Box 376 City North Kingstown	State Zip Code RI 02852		
Mailing Address PO Box 376 City North Kingstown Purpose of Disbursement		ou'	09 12 2012 Transaction ID : SB23.7499
Mailing Address PO Box 376 City North Kingstown Purpose of Disbursement Riley for Congress		011	09 12 2012
Mailing Address PO Box 376 City North Kingstown Purpose of Disbursement Riley for Congress Candidate Name		Category/	09 12 2012 Transaction ID : SB23.7499
Mailing Address PO Box 376 City North Kingstown Purpose of Disbursement Riley for Congress Candidate Name Michael Riley			Transaction ID : SB23.7499 Amount of Each Disbursement this Period
Mailing Address PO Box 376 City North Kingstown Purpose of Disbursement Riley for Congress Candidate Name Michael Riley	RI 02852	Category/ Type	Transaction ID : SB23.7499 Amount of Each Disbursement this Period
Mailing Address PO Box 376 City North Kingstown Purpose of Disbursement Riley for Congress Candidate Name Michael Riley Office Sought: House Senate President Disburset	RI 02852	Category/ Type	7 Transaction ID : SB23.7499 Amount of Each Disbursement this Period
Mailing Address PO Box 376 City North Kingstown Purpose of Disbursement Riley for Congress Candidate Name Michael Riley Office Sought: House Senate Disburser	ment For: 2012 Primary General	Category/ Type	7 Transaction ID : SB23.7499 Amount of Each Disbursement this Period
Mailing Address PO Box 376 City North Kingstown Purpose of Disbursement Riley for Congress Candidate Name Michael Riley Office Sought: House Senate President State: RI District: 02	ment For: 2012 Primary General Other (specify)	Category/ Type	Transaction ID : SB23.7499 Amount of Each Disbursement this Period 3000.00
Mailing Address PO Box 376 City North Kingstown Purpose of Disbursement Riley for Congress Candidate Name Michael Riley Office Sought: House Senate President Disburset	ment For: 2012 Primary General Other (specify)	Category/ Type	7 Transaction ID : SB23.7499 Amount of Each Disbursement this Period

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 14 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

22

^{AME OF COMMITTEE (In Full)} Rhode Island Republican State Cen	tral Commit	tee		
A. Full Name (Last, First, Middle Initial) of Debte	Nature of Debt (Purpose):			
Campaign Solutions	Direct Mail Back Debt			
Mailing Address 228 South Washington Street				
City State	Zip Code			
Alexandria	VA	22314		
Outstanding Balance Beginning This Period			Transaction ID: SD10.4144	
1500.00				
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period	
0.00		0.00	1500.00	
B. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose):	
Timothy Costa			Back Pay	
Mailing Address 84 Enfield Avenue				
City State	Zip Code			
Providence	RI	02908		
Outstanding Balance Beginning This Period			Transaction ID : SD10.4146	
2500.00				
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period	
0.00		0.00	2500.00	
C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of Debt (Purpose):	
Hasley Properties			Rent Back Debt	
Mailing Address 18 Burnside Street				
City	State	Zip Code		
Bristol	RI	02809		
Outstanding Balance Beginning This Period			Transaction ID : SD10.4148	
1587.39				
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period	
0.00		0.00	1587.39	
		7		
SUBTOTALS This Period This Page (optional)			5587.39	
2) TOTALS This Period (last page this line number only)				
) TOTAL OUTSTANDING LOANS from Schedule	·,,			
) ADD 2) and 3) and carry forward to appropriate	>			

1mage# 13964515463 PAGE 15 / 22

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SD10 Transaction ID: SD10.4144

(Current loan amount of 1500.00 from a balance of 1500.00 has been forgiven)

Form/Schedule: SD10 Transaction ID: SD10.4146

(Current loan amount of 2500.00 from a balance of 2500.00 has been forgiven)

1mage# 13964515464 PAGE 16 / 22

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SD10 Transaction ID: SD10.4148

(Current loan amount of 1587.39 from a balance of 1587.39 has been forgiven)

Form/Schedule: Transaction ID:

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

	9
X	10

22

17 OF

NAME OF COMMITTEE (In Full) Rhode Island Republican State Central Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Travel Back Debt JLM Consulting Mailing Address Info Requested City State Zip Code Alexandria 22314 Transaction ID: SD10.4150 Outstanding Balance Beginning This Period 1000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1000.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Event Exp Back Debt Kentish Guards Mailing Address Main Street City State Zip Code East Greenwich 02818 RΙ Outstanding Balance Beginning This Period Transaction ID: SD10.4152 226.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 226.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Event Exp Photography Back Debt Richard Kizarian Mailing Address 337 Sastram Street Zip Code City State 02908 Providence RI Transaction ID: SD10.4160 Outstanding Balance Beginning This Period 600.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 600.00 0.00 1826.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

1mage# 13964515466 PAGE 18 / 22

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SD10 Transaction ID: SD10.4150

(Current loan amount of 1000.00 from a balance of 1000.00 has been forgiven)

Form/Schedule: SD10 Transaction ID: SD10.4152

(Current loan amount of 226.00 from a balance of 226.00 has been forgiven)

1mage# 13964515467 PAGE 19 / 22

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SD10 Transaction ID: SD10.4160

(Current loan amount of 600.00 from a balance of 600.00 has been forgiven)

Form/Schedule: Transaction ID:

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 20
FOR LINE NUMBER: (check only one)

9 **X** 10

20 OF

					/	
	ME OF COMMITTEE (In Full) hode Island Republican State Cent	ral Comm	ittee			
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Providence Marriot Mailing Address Orms Street				Nature of Debt (Purpose): Event Exp Election 2000	
	City State Providence	Zip Code RI 02903			_	
	Outstanding Balance Beginning This Period				Transaction ID : SD10.4154	
	1198.53					
	Amount Incurred This Period	Pay	yment This Period		Outstanding Balance at Close of This Period	
	0.00		,	0.00	1198.53	
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hon Joan Quick				Nature of Debt (Purpose): Back Pay	
	Mailing Address 16-G Mullen Hill Road					
	City State Little Compton	Zip Code RI	02837			
	Outstanding Balance Beginning This Period 2575.00				Transaction ID : SD10.4156	
	Amount Incurred This Period	Pay	yment This Period		Outstanding Balance at Close of This Period	
	0.00			0.00	2575.00	
ı	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ralph Stuart Band				Nature of Debt (Purpose): Event Exp Back Debt	
	Mailing Address 3 Regency Plaza					
	City Providence	State RI	Zip Code 02903			
	Outstanding Balance Beginning This Period				Transaction ID : SD10.4158	
	325.00					
	Amount Incurred This Period	Pay	yment This Period		Outstanding Balance at Close of This Period	
	0.00			0.00	325.00	
1)	SUBTOTALS This Period This Page (optional)				4098.53	
2)	TOTALS This Period (last page this line number	only)		▶	11511.92	
3)	TOTAL OUTSTANDING LOANS from Schedule (C (last page o	nly)	▶	0.00	
4)	4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶			only) ▶	11511.92	

1mage# 13964515469 PAGE 21 / 22

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SD10 Transaction ID: SD10.4154

(Current loan amount of 1198.53 from a balance of 1198.53 has been forgiven)

Form/Schedule: SD10 Transaction ID: SD10.4156

(Current loan amount of 2575.00 from a balance of 2575.00 has been forgiven)

1mage# 13964515470 PAGE 22 / 22

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SD10 Transaction ID: SD10.4158

(Current loan amount of 325.00 from a balance of 325.00 has been forgiven)

Form/Schedule: Transaction ID: